

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 12 / 37

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Aircraft Owners and Pilots Association Political Action Committee

**A.**

Full Name (Last, First, Middle Initial)

MR MARC LEVINE

Mailing Address 3500 SW CENTER CT

City

PALM CITY

State

FL

Zip Code

34990-2312

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
SELF

Occupation

PHYSICIAN

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 3 / 2 0 1 1

Transaction ID: 39968095

Amount of Each Receipt this Period

250.00

**B.**

Full Name (Last, First, Middle Initial)

KENNETH CLAUSEN

Mailing Address 9315 E CENTER AVE APT 9A

City

DENVER

State

CO

Zip Code

80247-1277

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
RETIRED

Occupation

RETIRED

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 1 2 / 2 0 1 1

Transaction ID: 39968145

Amount of Each Receipt this Period

1000.00

**C.**

Full Name (Last, First, Middle Initial)

MR ROLAND MANSFIELD

Mailing Address 2097 CIELO BONITO

City

ALAMOGORDO

State

NM

Zip Code

88310-7859

FEC ID number of contributing  
federal political committee.

C

Name of Employer  
NONE PROVIDED

Occupation

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

250.00

Date of Receipt

M M / D D / Y Y Y Y  
0 4 / 0 5 / 2 0 1 1

Transaction ID: 39968192

Amount of Each Receipt this Period

150.00

**SUBTOTAL** of Receipts This Page (optional) .....

1400.00

**TOTAL** This Period (last page this line number only) .....